ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| | AS | | 08/06/00 |
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | 10 8-10-00 |
| FORMALITY REVIEW | DMK | 6969 | 9/12/00 |
| RESPONSE FORMALITY REVIEW | '' | '' | 10/20/00 |
| | | | |

## INDEX OF CLAIMS

| | | | | | |
|---|---|---|---|---|---|
| ✔ | Rejected | | N | | Non-elected |
| = | Allowed | | I | | Interference |
| — | (Through numeral)... Canceled | | A | | Appeal |
| ÷ | Restricted | | O | | Objected |

| Claim (Final / Original) | Date | Claim (Final / Original) | Date | Claim (Final / Original) | Date |
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If more than 150 claims or 10 actions staple additional sheet here

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